APPLICATION DATA SHEET

APPLICATION INFORMATION

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REGULAR Application Type:: UTILITY Subject Matter:: NONE

BRACHYTHERAPY APPARATUS AND CD-ROM or CD-R?::

METHODS OF USING SAME Title::

312.00010101

Attorney Docket Number:: 1 Suggested Drawing Figure:: 16

Total Drawing Sheets:: YES Small Entity?::

INVENTOR INFORMATION

INVENTOR Applicant Authority Type::

United States of America Primary Citizenship Country::

FULL CAPACITY

Status:: Gail Given Name:: S.

Middle Name:: I FBOVIC Family Name:: Santa Monica City of Residence:: California

State or Province of Residence:: United States of America

Country of Residence:: 201 Ocean Avenue, No. 406P Street of Mailing Address:: Santa Monica

City of Mailing Address:: California

State or Province of Mailing Address:: United States of America Country of Mailing Address::

90402

Postal or Zip Code of Mailing Address::

INVENTOR Applicant Authority Type::

United States of America Primary Citizenship Country::

FULL CAPACITY Status::

George Given Name:: D. Middle Name:: HERMANN Family Name:: Anchorage

City of Residence:: Alaska State or Province of Residence::

United States of America Country of Residence::

2460 Sentry Drive, No. 4 Street of Mailing Address:: Anchorage

City of Mailing Address:: Alaska

State or Province of Mailing Address:: United States of America

Country of Mailing Address:: 99507

Postal or Zip Code of Mailing Address::

CORRESPONDENCE INFORMATION

26813 Correspondence Customer Number::

REPRESENTATIVE INFORMATION

26813 Representative Customer Number::

DOMESTIC PRIORITY INFORMATION

DOMESTIC PRIOF	RITY INFORMATION		Derent Filing Date::
	Continuity Type::	Parent Application	Parent Filing Date:: 09/10/02
Application::	Non-Provisional of	60/409,449	09/10/02
This Application	110		